CITY OF MIAMI BEACH

1700 CONVENTION CENTER DRIVE, MIAMI BEACH FL 33139-1824 http://ci.miami-beach.fl.us



FINANCE DEPARTMENT

CHANGE IN PERSONS VENDING FORM FOR LOTTERY PERIOD_____TO____

Date:	_	
Organization:		
Current Listed Persons V	ending or Distributing	(Please Print)
NAME		Social Security Number
Proposed List of Persons	Vending or Distributir	ng (Please Print)
NAME		Social Security Number
-		
Signature (Authorized Director/Officer of Org)		Printed Name
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NOTE: This change will only be valid for the above period of time and requires that a new permit be issued.